

Wisconsin Department of Corrections

Governor Scott Walker | Secretary Jon E. Litscher

Office of Detention Facilities

February 14, 2018

Sheriff Richard Schmidt Milwaukee County Sheriff's Office 821 W. State Street, Room 107 Milwaukee, WI 53233

RE: Milwaukee County Jail: Criminal Justice Facility, 2017 Annual Inspection

Dear Sheriff Schmidt:

The 2017 annual inspection of the Milwaukee County Jail was conducted on December 14 and December 15, 2017, pursuant to Wisconsin Statute 301.37(3). The inspection compared the facility and its operations to the Department of Corrections Administrative Code, Chapter DOC 350, and to applicable state statutes. The Milwaukee County Jail has a rated capacity of 972. On the first day of the inspection, a total of 912 individuals were in custody (819 male, 93 female). This report summarizes the findings of the inspection and identifies improvements since the last annual inspection, as well as any applicable recommendations.

INSPECTION SUMMARY

Summary of Progress from the Previous Year

Since the last annual inspection in 2016, a number of operational changes have been realized at the facility. Some of these changes include the following:

- ➤ New leadership was assigned to the jail by the Sheriff. Deputy Inspector Aaron Dobson was placed into the position of Jail Commander, and Captain Daniel Dittberner as the Assistant Jail Commander. Both are now responsible for the operation and management of the Milwaukee County Jail.
- A new correctional management computer system has been installed (Pro-Phoenix) as an upgrade to the former mainframe computer application.

- The number of inmate telephones available has doubled in each housing unit from six (6) to twelve (12). The increase allows more individuals to use the telephone, thus significantly reducing the wait time.
- The "red security line" around the officer desk in the direct supervision housing units has been significantly reduced to permit inmates more movement in the dayrooms. The reduction also affords staff and inmates the opportunity to speak in a more private setting when the officer is at their work station.
- Additionally, the old carpeting in the housing unit dayrooms is being replaced with floor tile.
- The use of "nutraloaf" has been eliminated in disciplinary segregation and is only being used on a temporary basis for those inmates who commit rule violations directly related to their food or food tray.

Physical Environment

The inspection included a walkthrough of the facility including housing areas, special needs area, programming space, intake/booking area, property, kitchen, court holding, and health services unit. Overall, the facility was found to be in good condition. In large part, the individual cells, dayrooms, and showers were found to be clean, and it is apparent that staff is holding inmates accountable for their living areas. It should be noted that there continues to be a limited amount of graffiti found throughout the facility, particularly in the cells which is excellent.

Although the monthly safety and sanitation inspections being completed by staff are a good tool to track maintenance issues throughout the facility, the form is confusing and does not appear to depict the actual date of when a repair was completed. As such, the documented date of a repair spurred by a submitted maintenance request is frequently not accurate. Staff indicated that the repair date reflects when maintenance logged the completed activity and not when the repair was actually accomplished. This office was informed that maintenance will begin utilizing an electronic tablet while onsite for repairs that will reflect "real time" completion dates. The jail indicated that this will commence in 2018. The monthly safety and sanitation inspection report also captures contraband found during the shakedowns of the housing areas which is a good correctional best practice.

The utilization of two officers as liaisons to Facilities Management continues to be effective and both staff do an exemplary job in ensuring maintenance issues are resolved in a timely manner. This office was informed that there are typically two (2) plumbers available to the facility each day which is a significant improvement over past years, and a testament to the facility's liaisons in managing needed repairs. Yet as noted in past reports, given the age, size and average daily population housed at the jail, it continues to be recommended that priority be given to the establishment of a full-time facilities manager position, similar to what is provided at the

Milwaukee County House of Correction. The timeliness to correct maintenance needs within the jail should not be underestimated in terms of maintaining a safe and secure environment for inmates, staff and the community.

As noted in past inspection reports, the flooring and walls in the hallway that connects the kitchen and dishwasher/sinks area are in need of repair and replacement. Numerous floor tiles are missing with others broken.

At the time of inspection, there was a need to have a thermometer placed in the refrigerator located in the booking area, and for temperatures to be taken and documented in a similar manner as the coolers in the kitchen. This office has been notified that a thermometer has been purchased and documentation of temperatures is occurring.

It was again suggested that jail administration meet with CenturyLink to discuss the feasibility of adding more video visitation monitors to each of the housing units. Currently, only two monitors are accessible to inmates for video visits in each housing unit.

The property area at the facility continues to be exceptionally well maintained. Staff continues to do an excellent job in coordinating inmate property items, including personal valuables that have been left behind upon release such as driver's licenses, identification cards, jewelry, eyeglasses, etc. However, the amount of property that has been left at the facility by inmates continues to increase which is further diminishing available space. Currently, the facility holds inmate property for one year prior to auction or disposal. It was suggested that jail administration discuss the length of time property is required to be maintained with Corporation Counsel as two different state statutes appear to address the issue: Stat. 59.66(3) and Stat. 66.0139(2).

The walkthrough of the booking area brought forth a concern regarding the number of inmates being held in a single group holding room. During the inspection, it was found that security staff was placing numerous inmates (12-15) into a single group holding room when additional holding rooms were empty and available. Although jail administration has since added signage to each group holding room with a maximum capacity based upon the requirements set forth in Wisconsin Administrative Code, Chapter DOC 350, it was recommended that a formal procedure be implemented regarding how the group holding rooms in the booking area are utilized.

Jail Operations

Security practices are being completed as required including monthly door and lock inspections, fire inspections (last completed by the City of Milwaukee's Department of Neighborhood Services on 10/19/17), fire drills (each shift), SCBA checks, inmate classification, and physical observation checks. As noted in past inspections, the jail continues to utilize an excellent array of quality check tools to ensure safety and security (e.g., key inventory, monthly shakedown logs).

A spot review of the physical security	checks (via Schlage Card Reader) indicated that they are
being completed approximately	minutes at irregular intervals, which is an excellent
practice. Security checks for those inn	nates identified as special needs or with suicidal ideation
are being completed minutes	and at irregular intervals.

However, there was a concern regarding the frequency of physical security checks being documented in both the booking and court staging areas of the jail. Although security staff continuously moves inmates in and out of the group holding rooms in both the booking and court staging areas that suggests well-being checks are being completed, the lack of consistent documentation is in need of attention.

Currently, security staff assigned to the booking and court staging areas of the jail document their physical security checks in both the corrections management system and a manual logbook. Given the amount of inmate movement being undertaken as well as other required tasks being completed, it appears that staff is documenting their security checks when time permits. This has led to inconsistencies and/or omissions when comparing the times recorded on the corrections management system and manual logbook. However, it should be noted that reviews of video surveillance does indicate that checks are being made. It was suggested that jail administration review the feasibility of adding Schlage Card Readers in both the booking and court staging areas. This would eliminate the need to document physical security checks in the corrections management system and manual logbook.

This office was recently informed that you have instituted a new procedure for the completion of physical security checks in the booking and court staging areas that provides further quality assurance via supervisory staff to ensure all well-being checks are documented according to Milwaukee County Sheriff's Office policy. In addition, your office has authorized and initiated the process for installing Schlage Card Readers in the booking and court staging areas which is an excellent correctional best practice that should remediate the concern brought forth during the inspection.

A review of the manual logbooks being used to complete physical security check	s in the court
holding areas also showed that they are being completed approximately	minutes and at
irregular intervals. As an annual reminder, please ensure that all physical securit	y checks are
being completed at irregular intervals and not exactly	o the addition of
maximum capacity signs being placed on the group holding rooms in the jail's b	ooking area, it
was recommended that administration add signs to each court holding room in the	ne Public Safety
Building and Courthouse designating the maximum capacity permitted by admir	istrative code.

As noted in past inspection reports, it was again suggested that administration review the feasibility of installing a video conferencing system that would significantly reduce the amount of staff resources being utilized to move inmates from the jail to the adjacent courthouse. This could also reduce the need to house inmates waiting in the court holding rooms, thus permitting Deputies to focus more attention on the courtrooms. A number of jurisdictions in Southeastern Wisconsin have successfully implemented video conferencing from the jail to the courtroom for an individual's initial court appearance. It is again suggested that jail administration and the judiciary meet to discuss this possibility and to perhaps initiate a pilot in one or two courtrooms for initial court appearances to determine if operations become more efficient.

Pursuant to administrative code, each individual admitted to the facility is provided with access to the jail rules and regulations. The Sheriff's Office website also provides the public with additional information regarding jail services.

A disciplinary system is in place to address inmate rule violations. A range of sanctions is in place that is dependent upon the type of infraction violated. Inmates are receiving a copy of their disciplinary charges at least 24 hours prior to their hearing in accordance with administrative code. Disciplinary due process hearings are generally occurring within 3 days of the incident which exceeds the administrative code requirement of 7 days. Hearings are completed by Lieutenants during 1st and 2nd shift, and inmates maintain the ability to appeal to the Deputy Inspector. A record of all actions is being maintained. A review of disciplinary reports showed them to be well written and explanatory as to the alleged offense and hearing decision.

Objective jail classification continues to be used to determine inmate housing assignments, and an inmate grievance procedure is in place that permits inmates to address any concerns regarding the condition of their confinement. A grievance appeal process is also in place with a first appeal responded to by a Lieutenant, then by a Captain, and to the Deputy Inspector. A grievance log is also being produced that allows administration the ability to monitor the facility's inmate climate.

A spot review of completed use of force reports indicates that staff continues to provide detailed information on their actions, as well as those of the inmate. The Milwaukee County Sheriff's Office continues to maintain an excellent review process for all use of force reports with reviews being completed by supervisory staff, jail administration, Sheriff's Office Training Academy personnel (POSC instructors), and the Internal Affairs Division.

Health Care

Health care services continue to be contracted through Armor Correctional Health Services for medical and mental health services at both the Milwaukee County Jail and House of Correction. Nursing staff hours continue to be available on-site 24 hours per day at the jail. As noted in past reports, there continues to be concerns regarding the number of vacant Armor employed full-time nursing positions. However, both facilities continue to utilize Armor employed pool nurses

to fill needed positions. Positions that cannot be filled with Armor employed staff (full-time and pool) are supplemented by an additional core group of medical staff that is available to fill vacancies as needed. The majority of these contracted or agency staffs are in 13 week (or longer) contracts that assist in providing a degree of consistency and continuity of care. In other words, while Armor does maintain a number of vacant FTE nursing positions, active efforts are in place to cover the hours required per contract.

Armor also attempts to utilize pool and agency staff to compensate for other medical and mental health positions that have full-time vacancies. Documentation provided by Armor as of November, 2017 shows the following total hours available on-site at the Milwaukee County Jail per week:

Position	Hours Per Week
Medical Director:	32
Physician:	0
Nurse Practitioners/Psychiatric Nurse Practitioners:	320
Mental Health Director:	24
Psychiatrist:	16-24
Psychiatric Social Workers:	288
Case Managers:	40
Dentist:	16

As noted last year, the Medical Director is on-site at the jail for the majority of her time during the week (32 hours) and is therefore able to assess and evaluate inmates in addition to any administrative duties. However, it is apparent from the data provided by Armor that there is a critical need for the hiring of a Physician. Although mental health hours remain solid with 288 hours available onsite weekly by Psychiatric Social Workers, and an additional 40 hours by a case manager, there is also a need for an increase in onsite hours by a Psychiatrist. The jail continues to maintain a separate mental health unit and additional housing space for inmates who qualified mental health professionals have deemed stabilized enough to function in an open pod environment.

Medications continue to be administered by nursing staff, and inmates requesting health services are typically assessed and evaluated within three days of request. Testing for TB continues to be completed, as does a health care assessment within the first 7 days of confinement. In accordance with administrative code, all approved medications within the facility are being stored in ________. In large part, the jail does not accept medications coming off the street when someone is arrested, and only under exigent circumstances will medications be accepted. Therefore, the jail does not maintain unauthorized

medications within the facility. Inmate medical records continue to be maintained electronically and in a confidential manner.

Food Service

Inmate meals continue to be provided by Aramark. A review of the 4-week menu cycle showed that it offers a good variety of meals with at least two hot meals provided per day. All menus are reviewed and approved by a registered dietician, with a weekly average of 2500 calories per day being provided. Food continues to be transported to the jail from the House of Correction, where it is then prepared with the assistance of inmate workers and delivered to the housing units. The kitchen area was found to be clean and well organized, and an officer is assigned to the area when inmate workers are present. Aramark staff also completes monthly internal inspections of the kitchen in accordance with administrative code. Knives and sharps are being accounted for on a daily log, with security staff also documenting a quality assurance review of the knives/sharps each day.

Pursuant to administrative code DOC 350.11(3), EcoSure completed an independent food service inspection of the kitchen. The EcoSure inspection was completed on 11/13/17. However, it was brought forth with Aramark management that there was a concern that the documentation for the independent food service inspection did not indicate if any violations were found, nor with an overall percentage score as provided in past years. Aramark indicated that they would inquire with EcoSure as to why the kitchen inspection documentation was modified.

Inmate Programs

There continues to be a number of programming opportunities available to inmates confined at the Milwaukee County Jail. According to the information provided by jail administration, an impressive number of volunteer organizations (45 in total) provided services to the inmate population in 2017. Your staff should be commended for their continuing outreach and coordination with the Milwaukee County community to bring valuable resources into the facility for the inmate population. The following are examples of the programs available to inmates:

- ➤ Milwaukee Public School District: Educational services for inmates 16-21. Students may work toward earning high school credit or GED/HSED. Three full-time teachers are assigned to the jail to accommodate male and female inmates.
- **Religious Services:** Sunday worship services, Bible study, spiritual counseling.
- ➤ **Substance Abuse Counseling:** Alcoholics Anonymous, Narcotics Anonymous.
- ➤ **Pre-Natal Programming:** The Black Coalition offers a program for pregnant females incarcerated at the jail. A case manager, AODA counselor, mental health counselor, and health educator provide services to the women. Program provides both pre-natal as well as post-partum care.

- ➤ **Library Services:** A volunteer from the Benedict Center maintains the stock of library books in conjunction with jail staff. The jail has entered into a partnership with Half Price Books, who donates reading materials. Books are delivered to the housing units on a rotating basis each week.
- ➤ Law Library: Inmates submit requests to the Law Library Coordinator who researches and provides the information back to the inmate. Law books are available in all housing units.
- 1. It was again suggested that administration review the feasibility of developing a physical law library room with computers that could be accessed by all inmates in addition to the law books located in the housing units. Currently, the jail is paying for the use of LexisNexis to research inmate requests, so costs would be limited to adding computers and upgrading the room for a law library.

> Other Volunteer Programs

- a. Anger Management
- b. AODA
- c. Book Club
- d. Budgeting and Financing
- e. Domestic Violence Awareness
- f. Life Skills
- g. Meditation
- h. Parenting and Family Skills
- i. Relationship Building

The inspection also included a review of the facility's practices regarding inmate services. Blankets are being exchanged on a monthly basis, with issued clothing items laundered twice per week, and linens once per week (completed at the House of Correction). The facility maintains policies and procedures for inmate services such as mail (incoming/outgoing), visitation (video), recreation (indoor gyms), reading materials, and canteen. These policies and procedures indicate that all inmates are being provided reasonable access to these services.

Approval

On the dates of inspection there were **no violations of administrative code** found at the facility. The Milwaukee County Jail is approved for operation by this Department. This approval is with the understanding that continued compliance with the Department of Corrections Administrative Code, Chapter DOC 350 and applicable state statutes occurs. You and your staff should be proud of the accomplishments that have transpired over the past year as it is apparent to this office that the climate of the facility is moving in a positive direction, while concurrently maintaining a safe and secure environment

I would like to thank Deputy Inspector Aaron Dobson, Captain Daniel Dittberner, Captain William Duckert and the rest of your staff for their assistance and cooperation during this year's annual inspection and during times of my unannounced visits to the facility. Please feel free to contact me should you have any questions, or if I can be of assistance to you and your Office.

Sincerely,

Gregory A. Bucholtz, Ph.D.

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Inspector, Office of Detention Facilities

Cc: Tobie Weberg, Inspector

Aaron Dobson, Deputy Inspector

Daniel Dittberner, Captain

Chris Abele, County Executive

Kristi Dietz, ODF Director

File

CHAPTER DOC 350 INSPECTION DOCUMENT

COUNTY:	Milwaukee County Jail		D.	ATE: 2/14/18
	IN	IM.	ATE HOUSING AND CLASSIFICATION	
DOC 350.05	(3) (d) In jails that are construct	ted	or substantially remodeled on or after Septer	nber 1, 2014, double cells shall have a
floor area of	f at least 25 square feet of unenc	um	bered space per occupant.	
COMPLIANO	CE V	/EF	RIFICATION	
Me	eets standard		Policy and procedure manual review	Previous compliance documented
□ Ne	eeds improvement		Sample of facility records reviewed	Other (specify):
□ No	on-compliant		Sight confirmation by inspector	
∑ No	ot reviewed		Verbal confirmation by facility staff	
Comments:	The Milwaukee County Jail h	าลร	not undergone any construction or sub-	stantial remodel of cells since 9/1/14.
	•		3	
200000	(O) (I) DOG 070 07 (O) I I I I I I I			
			are constructed or substantially remodeled μ a of at least 70 square feet. NOTE: ODF reco	
			990, a cell shall have a floor area of at least 5	
COMPLIANO	CF V	/FF	RIFICATION	· ·
	eets standard	\Box	Policy and procedure manual review	Previous compliance documented
_ =	eeds improvement	Ħ	Sample of facility records reviewed	Other (specify):
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	St reviewed [ш	verbal committation by facility stair	
Comments:				
DOC 250 20	Davida calling If approved by	. 41.	a demonstrate the init about bove malining and	
			e department, the jail shall have policies and	
			hall determine jointly the adequate staffing no	
			nd security of the jail staff and inmates when been by the representatives of the county board	
			all remain in effect until rescinded or amende	
_	d and sheriff. Unless there is ad	pet	uate staff as agreed upon by the county boar	d and sheriff, double celling may not
occur.				
The written	agreement between the County E	Boa	ard and Sheriff is on file with the department a	and contains the following elements:
The	County Board and Sheriff agree to	o th	e stated staffing levels	
			nealth care staff, support and service staff and ac	Iministrative staff
	staffing pattern is detailed in the w		en agreement res of the County Board and the Sheriff	
- 1116	agreement is signed by represente	aliv	es of the county board and the offerin	
COMPLIANO	CE V	/EF	RIFICATION	
Me	eets standard		Policy and procedure manual review	Previous compliance documented
Ne	eeds improvement		Sample of facility records reviewed	Other (specify):
	on-compliant		Sight confirmation by inspector	· • •
No.	ot reviewed		Verbal confirmation by facility staff	
Comments:			•	

	50.20 (2) Inmates housed in the sar s. 302.36, Stats.	ne ce	ell shall have the same custody classification	on :	and be properly segregated as required
COMP	LIANCE	VEF	RIFICATION		
\square	Meets standard	X	Policy and procedure manual review		Previous compliance documented
	Needs improvement	Ħ	Sample of facility records reviewed	Ħ	Other (specify):
一百	Non-compliant	Ħ	Sight confirmation by inspector		, (- p) / -
一百	Not reviewed		Verbal confirmation by facility staff		
	ents: The jail maintains an object rements of s. 302.36, Stats.	tive	classification system (Northpointe Dec	cis	sion-Tree) and meets the
	50.20 (3) For male and female hous be maintained for single occupancy.	ing a	reas, at least one cell or 15% of the jail's to	tal	I number of cells, whichever is greater,
	LIANCE	VFF	RIFICATION		
	Meets standard	<u> </u>	Policy and procedure manual review	\Box	Previous compliance documented
$\frac{\square}{\square}$	Needs improvement	ᅢ	Sample of facility records reviewed	屵	·
+	Non-compliant		Sight confirmation by inspector	ш	Other (specify):
ᅳH	Not reviewed	$\overline{\mathbb{X}}$	Verbal confirmation by facility staff	—	
			<u> </u>		
Comm	ents: The jail maintains a sufficie	nt n	umber of cells for single occupancy.		
DOC 3	50.20 (4) Receiving cells may not be	e use	ed for double occupancy.		
COMP	LIANCE	VEF	RIFICATION		
\square	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant	X	Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
	ents: All receiving cells are used ng rooms within the booking/inta		single occupancy only. The jail also marea.	nai	intains a large number of group
mainta eligibi have p DOC 3 to clas	ain an objective prisoner classification in the prisoner participation policies and procedures relating to consider and prisoners, initial classification and its prisoners and its prisoner classification and its prisoners classification and it	in a lassi in a lassi in a lassi in a lassi ire pri ire cla eterrectication at e copers ssific	soner classification system, including the eclassification procedures and prisoner apparticipation in available work assignments on decisions. Is sification system based on point additive form	ide ide ppe mul	and housing assignment, and develop mmunity service projects. The jail shall entification and training of staff authorized eal process. Trograms and community service projects. It a or decision tree forced choice or similar diffication and appeals.
COMP	LIANCE	VEF	RIFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
一一	Needs improvement		Sample of facility records reviewed	f	Other (specify):
一一	Non-compliant	Ī	Sight confirmation by inspector	_	\ 1 \ Z/
一一	Not reviewed	X	Verbal confirmation by facility staff		
Comm			es an objective classification instrumer	nt '	with Classification Officers
			nent used adheres to 302.36 Stats.	it \	with diassification Officers

SAFETY AND SECURITY PRACTICES

DOC 350.18 Security. The jail shall have policies and procedures relating to jail security.

- Portable communications and alarm systems are in good working condition
- Intercom and emergency notification devices are in good working order

DOC 350.18 (1) Inmate supervision. The jail shall have a system providing for well-being checks of inmates. Policies and procedures shall provide that all inmates are personally observed by jail security staff at staggered intervals not to exceed the following:
(a) 60 minutes (b) 15 minutes for inmates housed on suicide watch.

	:	All inmates are personally observe In housing units of multiple cells, or			g each physical inspection. are encouraged to complete physical inspectio	ons	from within the housing unit.
					video monitoring system may be used to su		
DOC	35	0.18 (3) Documentation. Each ol	oser	va	tion shall be documented.		
		IANCE	V	ΈF	RIFICATION		
	X	Meets standard		\boxtimes	Policy and procedure manual review		Previous compliance documented
	<u> </u>	Needs improvement		\boxtimes	Sample of facility records reviewed		Other (specify):
		Non-compliant			Sight confirmation by inspector		
		Not reviewed	[X	Verbal confirmation by facility staff		
Sch app doc has now	orox cum c de v in	ge card reader system. Physical security of the process of adding Schlag. 60.18 (4) Inmate counts. Descript	cal rreg che e co ge C	se gul ck on Ca	es at irregular intervals. Security checks for those under a special ar intervals. There were some inconsists occurring in both the booking and coperns that were brought forth during the Readers to the booking and court settle system for physically counting inmates	al r sist our ne i stag	needs or suicide watch are occurring tencies and omissions with the staging areas. Jail administration inspection. Additionally, the facility is ging areas.
		, ,,	, wit	h a	minimum of one count per shift.		
		IANCE	V	EF	RIFICATION		
	<u> </u>	Meets standard		\boxtimes	Policy and procedure manual review		Previous compliance documented
		Needs improvement	[\boxtimes	Sample of facility records reviewed		Other (specify):
		Non-compliant			Sight confirmation by inspector		
L		Not reviewed		X	Verbal confirmation by facility staff		
Com	nme	nts: Inmate counts are being of	com	ıpl	eted daily on each shift.		
	•	Facility and area searches are com	nplet	ed		um	nenting facility and area searches.
		IANCE Manta at a standard			RIFICATION	$\overline{}$	Davidous consilience de consente d
<u> </u>	<u> </u>	Meets standard Needs improvement	Ľ	X	Policy and procedure manual review Sample of facility records reviewed	<u> </u>	Previous compliance documented
<u>_</u>	 	Non-compliant	<u>k</u> 	$\stackrel{\triangle}{=}$	Sight confirmation by inspector	Ш	Other (specify):
<u></u>	+	Not reviewed	<u>L</u>	\exists	Verbal confirmation by facility staff		
					<u> </u>	. :-	a completing
		nts: Searches are being comp e well documented.	леце	a	randomly and "for cause". The facility	y is	s completing shakedowns
DOC			ptio	ns	of procedures for conducting and docume	enti	ing inmate pat down, strip and body cavity
CON	ИPL	IANCE	V	ΈF	RIFICATION		
	X	Meets standard		X	Policy and procedure manual review		Previous compliance documented
	X	Needs improvement			Sample of facility records reviewed		Other (specify):
		Non-compliant		X	Sight confirmation by inspector		
Γ	٦	Not reviewed	Ī	X	Verbal confirmation by facility staff		

Comm	nents: All inmates are searche If necessary, bo		heir arrival into the jail. y searches are completed at a local h	nospital.
			nthly inspections shall be made to determining order. Each inspection shall be docu	ne if all jail doors and locks within and to the mented.
:		nd release	locks are all operable. es are repaired in a timely manner. es perating all locks, doors and releases.	
COMP	PLIANCE	VER	IFICATION	
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed	Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector	
	Not reviewed		Verbal confirmation by facility staff	
	nents: All doors and locks are ing/closing doors, locking me		and documented on a monthly basis and releases.	s. Staff appeared to be proficient in
(a (b	All issued keys shall be inventor	ied and ac ure area a	nd accessible in the event of an emergency	
COMP	PLIANCE	VER	IFICATION	
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
Ħ	Non-compliant	$\overline{\boxtimes}$	Sight confirmation by inspector	
一百	Not reviewed		Verbal confirmation by facility staff	
not ha	ave access to keys. 350.18 (9) Weapons control. Intr	oduction,	availability, control, inventory, storage an	
COMP	PLIANCE	VFR	IFICATION	
	Meets standard		Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
\dashv	Non-compliant		Sight confirmation by inspector	Other (specify).
ᅢ	Not reviewed		Verbal confirmation by facility staff	
and a	nents: No firearms are permitte are not accessible to inmates	ed to be	brought into the secure perimeter of	the jail. All weapons are safely stored
DOC 3 the fac	cility.			torage and use of tools and sharps within
•	Documentation of the control an			
	PLIANCE	VER	IFICATION	
	Meets standard		Policy and procedure manual review	Previous compliance documented
\Box	Needs improvement	$\underline{\underline{\boxtimes}}$	Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed	\boxtimes	Verbal confirmation by facility staff	
	nents: All tools and sharps are		d daily and documented on a form. T	he kitchen also maintains a log for the

DOC 350.19 Fire Safety. The jail shall have policies and procedures relating to fire safety.

DOC 350.19 (2) Each jail shall develop a fire safety policy in accordance with local fire department recommendations that addresses all of the following:

- a) Local fire department inspection requirements under sub. (5).
- b) Fire protection equipment location and maintenance. Each jail shall have and shall properly maintain fire alarms, smoke and thermal detectors, fire extinguishers and self-contained breathing apparatuses which operate for at least 30 minutes.
 - Fire extinguishers are properly maintained with recorded time and date of inspection.
 - Fire extinguishers are properly placed, secured and easily accessible to staff.
 - A fire extinguisher suitable for grease fires is provided in the kitchen.
 - Jail staff can demonstrate proficiency in the use of fire protection equipment.
- c) Training of staff in equipment use and the evacuation of inmates

d	 Staff training is documented A written evacuation plan Jail staff can articulate or continuous 		e the evacuation routes and policies of the jai	il.	
СОМ	PLIANCE	VER	IFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
10/1			of Milwaukee Department of Neighbor place, as well as SCBAs. Staff is trai		
	350.19 (3) The evacuation route for jail staff in the jail.	develope	d as part of the evacuation plan under sub	. (2	2)(d) shall be posted in a conspicuous
	PLIANCE	VER	RIFICATION		
\boxtimes	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
] Non-compliant	\boxtimes	Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
DOC		n and othe	roughout the facility and in conspicuous procedures shall be practiced or simulat ocumented.		
СОМ	PLIANCE	VER	RIFICATION		
X	Meets standard	\boxtimes	Policy and procedure manual review	Г	Previous compliance documented
Ē	Needs improvement		Sample of facility records reviewed	丅	Other (specify):
	Non-compliant		Sight confirmation by inspector	_	<u> </u>
F	Not reviewed		Verbal confirmation by facility staff		
Comn	nents: Fire drills are being co		· · ·	_	
	tained.	•	by the local fire department at least once e		ry 12 months and a record thereof shall be odes.
СОМ	PLIANCE	VER	IFICATION		
\boxtimes	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Ī	Other (specify):
	Non-compliant		Sight confirmation by inspector	_	- \ \ 1 \ \ 2/
Ē	Not reviewed		Verbal confirmation by facility staff		

Comments: The last fire inspection was completed on 10/19/17 by the City of Milwaukee Department of Neighborhood

Services.

	C 350.19 (6) There shall be monthl pections shall be documented.	inspections of the facility to ensure compliance with safety and fire prevention standards.			
CON	MPLIANCE	VERIFICATION			
	Meets standard	Policy and procedure manual review Previous compliance documented			
	Needs improvement	Sample of facility records reviewed Other (specify):			
	Non-compliant	Sight confirmation by inspector			
	Not reviewed	Verbal confirmation by facility staff			
Com	nments: Monthly safety inspecti	ns are being completed, and all fire protection equipment inspected as well.			
DOC prev inma Corp	C 350.22 (1) Jail staff may use phy vent death or bodily injury to the s	Il have policies and procedures for the use of force. ical force against an inmate only if force is necessary to change the location of an inmate or to fif member, the inmate or someone else, unlawful damage to property, or the escape of any the amount of force reasonably necessary to achieve the objective for which force is used. idden. VERIFICATION	t o		
	Meets standard				
<u> </u>					
<u> </u>	Needs improvement	Sample of facility records reviewed Other (specify):			
	Non-compliant	Sight confirmation by inspector			
	Not reviewed	✓ Verbal confirmation by facility staff ion reports, staff provides detailed explanations of the incident(s) leading to any use.			
DOC adm	of force. All use of force reports are reviewed by the Deputy Inspector, Sheriff's Training Academy staff (POSC instructor), as well as Internal Affairs. Milwaukee County maintains an excellent process for reviewing use of force incidents. DOC 350.22 (2) Any staff member who has used force to control an inmate or inmates shall submit a written report to the sheriff, jail administrator or the staff member's supervisor describing the incident. The report shall include all known relevant facts and be submitted by the end of the shift, unless otherwise authorized by the sheriff or sheriff's designee.				
CO1	 Supervisory review is cond MPLIANCE 	VERIFICATION			
	Meets standard				
<u> </u>			—		
	Needs improvement	Superior contacts and the superior contact and			
	Non-compliant	Sight confirmation by inspector			
	Not reviewed	Verbal confirmation by facility staff			
		detailing the reason for any use of force incident.			
DOC DOC the	DOC 350.23 Use of restraints. The jail shall have policies and procedures governing the use of restraints and control devices. DOC 350.23 (1) Restraint devices are never used as punishment and are not applied longer than necessary. Inventories are conducted and documented. DOC 350.23 (2) When an inmate is mechanically restrained for non-routine purposes, a written report must be completed by the end of the shift, unless otherwise authorized by the sheriff or sheriff's designee. Documentation shall include the reason for use, duration of use and corresponding wellness checks. Supervisory review is conducted and documented				
CON	MPLIANCE	VERIFICATION			
	Meets standard	Policy and procedure manual review Previous compliance documented			
Γ	Needs improvement	Sample of facility records reviewed Other (specify):			
ᅣ	Non-compliant	Sight confirmation by inspector			
<u> </u>	Not reviewed	Verbal confirmation by facility staff	—		
Com		ated for any use of a restraint device, with health care services immediately notifie	d.		

Office of Detention Facilities DOC-2744 (4/2015)

DOC 350.24 Discipline. The jail shall have policies and procedures outlining inmate discipline and due process.

DOC 350.24 (1) Inmates rules of behavior. Every jail shall have written rules of behavior for inmates. At the time of admission, each person shall be notified verbally of the existence of jail rules for inmate behavior and the potential disciplinary actions for violations of the rules. Each inmate shall be provided with a copy of the jail rules or copies of the rules shall be posted in conspicuous places in the jail.

DOC 350.24 (2) Discipline for minor violation. (See code for specific language.)

- (a) A minor discipline is a verbal or written reprimand, restriction of privileges or placement in disciplinary segregation for 24 hours or less.
- (b) Inmate is informed of violation, potential discipline and disciplinary procedures for minor violations.
- (c) Inmate has opportunity to make verbal statement about alleged violation to a staff member
- (d) Staff member may impose a minor discipline if found that violation occurred
- (e) Supervisor is informed of incident by staff member. If supervisor concludes violation is major, then it shall be handled in accordance with Sub. (3). If supervisor finds that no violation occurred, the inmate shall be notified that the charge has been dismissed.
- (f) Inmate is notified of right to appeal and of appeal procedure.
- (g) Information made part of inmate's file. If supervisor finds no violation occurred, the due process records shall reflect those findings.

DOC350.24 (3) Discipline for major violation. (See code for specific language.)

- (a) A major discipline is restriction of privileges for more than 24 hours, placement in solitary confinement for more than 24 hours in accordance with s. 302.40, Stats., loss of good time in accordance with s. 302.43, Stats., restrictions affecting Huber law privileges in accordance s. 303.08, Stats., or restrictions affecting work release in accordance with s. 303.065, Stats.
- (b) Written report to supervisor within 24 hours of incident
- (c) Inmate notification of charges and right to hearing 24 hours in advance of hearing.
- (d) Due process hearing within seven calendar days, unless inmate waives the right to a due process hearing.
 - 1. Impartial hearing officer or committee (not involved in incident)
 - 2. Inmate's right to be present at hearing, make a statement and present evidence. Reason for inmate's absence documented.
 - 3. Inmate's right to present witnesses. Reason for absence of witness documented.
 - 4. Inmate's right to staff advocate if inmate is illiterate or if issues are complex.
 - 5. Hearing officer may consider inmate's mental illness, developmental disability or other emotional or mental disability as a mitigating factor in imposing discipline.
 - 6. Written decision stating discipline administered. Copy to inmate.
 - 7. Inmate is notified of right to appeal and appeal procedure
 - 8. Incident information, discipline administered and decision shall be made part of inmate file. If found no violation occurred, the due process records shall reflect those findings.
- e) If inmate waives right to a due process hearing, violation shall be disposed of in accordance with procedures for minor violations. Major discipline may be imposed if relevant staff member finds a violation occurred. Waiver does not constitute an admission of the alleged violation.

350.24(4) Classification.

(a)	An inmate may be evaluated for cus	ody classification following the imposition of discipline.	
COMPLI	ANCE	VERIFICATION	
\boxtimes	Meets standard	Policy and procedure manual review Previous compliance documented	
	Needs improvement	Sample of facility records reviewed Other (specify):	
	Non-compliant	Sight confirmation by inspector	
	Not reviewed	∀erbal confirmation by facility staff	

Comments: Inmates are provided with notification of charges and a right to hearing 24 hours in advance of their hearing. Typically, disciplinary hearings are completed within 3 days of the incident. Inmates also maintain the ability to appeal a disciplinary finding to the Deputy Inspector.

HEALTH CARE

DOC 350.13 Inmate health screening. The jail shall have policies and procedures for inmate health screening.

DOC 350.13 (1) Use of a health screening form that is developed in conjunction with health care professionals and is used at booking with each inmate to record information about medical, mental health and dental conditions, physical and developmental disabilities, alcohol or other drug abuse problems and suicide risk.

DOC 350.13 (2) Referrals to medical, mental health or supervisory staff in a timely manner in response to identified concerns. If urgent concerns are identified, the referral shall be immediate.

DOC 350.13 (3) Review of the health screening form by health care or other designated staff within 72 hours if non-urgent concerns are identified.

Review by health care provider is conducted and documented.

DOC 350.13 (4) Documentation of health screening results and subsequent review of the health screening form in an inmate's confidential file.

- Health screening forms are legible, accurate and complete, including detailed narratives when necessary.
- Health care professionals provided input into the content of the health screening form.
- The health screening form contains usable information relating to the inmate's medical condition, dental condition, medical disabilities, developmental disabilities, alcohol and other drug abuse and suicide risk.
- A health screening form is completed for each inmate booked into the facility.
- The health screening forms are reviewed for completeness, accuracy, legibility and the appropriateness of the decisions made regarding referral, housing, classification and other actions.
- The identity of the person completing the health screening form is documented.

COMPLI	ANCE	VERIFICATION
\boxtimes	Meets standard	
	Needs improvement	Sample of facility records reviewed Other (specify):
	Non-compliant	Sight confirmation by inspector
	Not reviewed	∀erbal confirmation by facility staff
^	A leastly someonics forms is	and the district of the course of the district of the district of the Mills of the Courty Indian

Comments: A health screening form is completed by a nurse on each individual booked into the Milwaukee County Jail. An initial screening is completed during the pre-booking process and once again when the inmate clears the search room.

DOC 350.13 (5) A health appraisal that is to be completed within 14 days after arrival at the facility unless a health appraisal has been completed by health care staff within the previous 90 days. The health appraisal shall be completed by health care staff in accordance with protocols established by the responsible physician.

COMPLIANCE		VERIFICATION			
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		

Comments: A health assessment is being completed on each inmate within 14 days of confinement.

DOC 350.14 Inmate health care. There shall be sufficient equipment, material, space and supplies for the performance of health care services in a confidential manner.

COMPLIA	ANCE	VERIFICATION	
\boxtimes	Meets standard	Policy and procedure manual review	Previous compliance documented
	Needs improvement	Sample of facility records reviewed	Other (specify):
	Non-compliant	Sight confirmation by inspector	
	Not reviewed	Verbal confirmation by facility staff	

Comments: There are specific offices designated for health care services at the jail. The space appears to be sufficient to meet the needs of the inmate population. A medical infirmary consisting of 11 beds is also available at the jail.

Not reviewed

Office of Detention Facilities DOC-2744 (4/2015) DOC 350.14 (1) The sheriff shall provide or secure necessary medical and mental health treatment and emergency dental care for inmates in custody. Jail provides a specific form for inmates to request medical assessment or treatment. All inmate requests for medical care are reviewed by health care staff. The dispositions of the inmate medical requests are documented by health care staff members. **VERIFICATION COMPLIANCE** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Inmates have a form available to request medical and mental health services. Nurses are available 24/7, and mental health services via a qualified mental health professional are available daily. DOC 350.14 (3) Health care staff shall be in compliance with state and federal licensure certification and registration. Verification of compliance shall be maintained at the facility. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Jail administration maintains copies of the licensure of medical and mental health staff. DOC 350.14 (4) Medical records shall be kept separate from other records and shall be maintained in a confidential manner in accordance with s. 146.81 to s. 146.83, Stats., and any other applicable state or federal laws. Medical record accessibility is limited to medical staff, the jail administrator and the administrator's designees as appropriate. **COMPLIANCE** VERIFICATION Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: All medical records are maintained in the health care office in a confidential manner. All medical records are electronic. DOC 350.14 (6) Officers shall receive documented annual training on health care policies and procedures, medications and health screening at the time of admission. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector

Verbal confirmation by facility staff

Comments: All staff receive annual training on health care procedures, medications and health screening.

DOC 250.15 Health care policy. The jail shall have policies and procedures for inmate health care.								
DOC 350.15 Health care policy. The jail shall have policies and procedures for inmate health care.								
DOC 350.15 (1) Documentation of health ref	ferra	als made or health care provided.						
DOC 350.15 (2) Maintenance of documents in an inmate's confidential file.								
COMPLIANCE VERIFICATION								
Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented				
Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):				
Non-compliant	\boxtimes	Sight confirmation by inspector						
Not reviewed		Verbal confirmation by facility staff						
Comments: All medical records are main electronic.	ntaiı	ned in the health care office in a confid	dei	ntial manner. All medical records are				
DOC 350.15 (3) Names, addresses and telep	nha	so numbers of health care providers or ago	no	ios who have agreed to provide				
emergency and routine health care services			HIC	les who have agreed to provide				
 Contact information is available to staf 								
COMPLIANCE	VER	IFICATION						
Meets standard	П	Policy and procedure manual review	\neg	Previous compliance documented				
Needs improvement	Ħ	Sample of facility records reviewed	┪	Other (specify):				
Non-compliant	Ħ	Sight confirmation by inspector		Cuter (Speeliy).				
	Ħ	Verbal confirmation by facility staff						
Comments: Staff is aware of the contact		· · · · · · · · · · · · · · · · · · ·	٠ ١	ther services peeded at the iail				
DOC 350.15 (4) Referral of an inmate to jail I Health care referrals are made and do	ocun	nented.	ide	e health care.				
Staff are knowledgeable about the hear								
	_	IFICATION						
Meets standard	$\underline{\underline{M}}$	Policy and procedure manual review	ᆗ	Previous compliance documented				
Needs improvement	$\underline{\underline{M}}$	Sample of facility records reviewed		Other (specify):				
Non-compliant	$\underline{\underline{M}}$	Sight confirmation by inspector						
Not reviewed	Ш	Verbal confirmation by facility staff						
Comments: A medical and mental health request form is readily available to all inmates. All health care referrals are documented in the inmate's medical record. DOC 350.15 (5) Designation of staff who have authority to make health care decisions, including emergency medical and dental care.								
DOC 350.15 (6) Non-emergency health care,	, inc	cluding the use of an inmate's personal phy	ysi	cian.				
COMPLIANCE V	COMPLIANCE VERIFICATION							
■ Needs improvement Sample of facility records reviewed Other (specify):								
Non-compliant		Sight confirmation by inspector						
Not reviewed	\boxtimes	Verbal confirmation by facility staff						
Comments: Staff is aware of who has the authority to make health care decisions, including emergency situations.								

C-2744 (4/2015)									
350.15 (7) Schedule of inmate acc	cess to routine medical care.								
list, or other appropriate means.									
	<u> </u>	The unable to read of write.							
•		Utilei (specily).							
Not reviewed									
ments: Inmates are provided in		dical care. Nurses see inmates on a daily							
350.15 (8) Provision for inmates v	with chronic medical conditions.								
PLIANCE	VERIFICATION								
Meets standard	Policy and procedure manual review	Previous compliance documented							
Needs improvement	Sample of facility records reviewed	Other (specify):							
Non-compliant	Sight confirmation by inspector								
Not reviewed	Verbal confirmation by facility staff								
	·	•							
Inmate medical requests are doc Written disposition of medical red	cumented on an official medical request form. quests are retained in inmate's confidential medical	file.							
		Draviaus compliance decumented							
		Previous compliance documented							
·		Other (specify):							
·									
		to for core on a daily basis. Nursing stoff							
ding emergency services.									
·		a moderno.							
		Duniana ampliana da sumanta d							
		Previous compliance documented							
		Other (specify):							
•	Verbal confirmation by facility staff								
Not reviewed		re notes, including documentation of when							
	The schedule of inmate access to list, or other appropriate means. An alternative means for inmates PLIANCE Meets standard Needs improvement Non-compliant Not reviewed ments: Inmates are provided informates and schedule appointments 350.15 (8) Provision for inmates were provided informates and schedule appointments 350.15 (8) Provision for inmates were provided informates and schedule appointments 350.15 (9) Provision for inmates were used for those in need of the provision of medical recompliant Non-compliant Not reviewed ments: The jail currently has provise are used for those in need of the provision of medical recompliant Non-compliant Non-compliant Non-compliant Non-compliant Not reviewed ments: Procedures are in place attended that they receive requesting a provided or place attended that they receive requesting a provided or place attended that they receive requesting a provided or place attended that they receive requesting a provided or place attended that they receive requesting a provided or place attended that they receive requesting a provided or place attended that they receive requesting a provided or place attended and place attended a	350.15 (7) Schedule of inmate access to routine medical care. The schedule of inmate access to medical care is provided to inmates in writing via I list, or other appropriate means. An alternative means for inmates to access medical care is provided if the inmates a PLIANCE VERIFICATION Meets standard Policy and procedure manual review Needs improvement Sample of facility records reviewed Non-compliant Sight confirmation by inspector Verbal confirmation by facility staff ments: Inmates are provided information on how to request access to me s and schedule appointments for the physician and/or nurse practitioner 350.15 (8) Provision for inmates with chronic medical conditions. PLIANCE VERIFICATION Meets standard Policy and procedure manual review Non-compliant Sight confirmation by inspector Not reviewed Non-compliant Sight confirmation by facility staff ments: The jail currently has procedures in place for inmates with chronic s are used for those in need of chronic care. The jail maintains a medical star used for those in need of chronic care. The jail maintains a medical star equests are documented on an official medical request form. Written disposition of medical requests are retained in inmate's confidential medical PLIANCE VERIFICATION Meets standard Policy and procedure manual review Needs improvement Sample of facility records reviewed Non-compliant Non-compliant Sight confirmation by inspector Verification Verification Verification Verification Verification Verification Meets standard Policy and procedure manual review Non-compliant Sight confirmation by facility staff ments: Procedures are in place where health care staff receive all request and the procedure manual review and the procedure manual review and procedure manual review and procedure ments: Procedures are in place where health care staff receive all request and procedure manual review and procedur							

Office of Detention Facilities DOC-2744 (4/2015)

DOC 350	0.15	(1	1)	F	ro	visi	on o	f spec	ial di	et if	orde	red by	a q	uali	ified	health	care	e p	rof	ess	ion	al.
	_																					

- Special diets ordered by a qualified health care professional are documented in the inmate's confidential medical file.
- The jail health care providers, food service providers, and correctional staff are notified of special diets ordered by a qualified health care professional.

COMPLIA	ANCE	VERIFICATION						
\boxtimes	Meets standard	Policy and procedure manual review	Previous compliance documented					
	Needs improvement	Sample of facility records reviewed	Other (specify):					
	Non-compliant	Sight confirmation by inspector						
	Not reviewed	∀ Verbal confirmation by facility staff						

Comments: All special diets are approved by a qualified medical professional and forwarded to the current food service vendor, Aramark.

DOC 350.15 (12) Pregnancy management.								
COMPLIANCE	VERIFICATION							
Meets standard	Policy and procedure manual review	Previous compliance documented						
Needs improvement	Sample of facility records reviewed	Other (specify):						
Non-compliant	Sight confirmation by inspector							
Not reviewed	Verbal confirmation by facility staff							

Comments: The facility maintains a policy and protocol for pregnancy management.

DOC 350.15 (13) Maintenance of agreements between the jail and providers of health care services.									
COMPLIA	NCE	VERIFICATION							
\boxtimes	Meets standard	Policy and procedure manual review Previous compliance documented							
	Needs improvement	Sample of facility records reviewed Other (specify):							
	Non-compliant	Sight confirmation by inspector							
	Not reviewed	∀erbal confirmation by facility staff							

Comments: Milwaukee County maintains a contract with Armor Correctional Health Services for medical and mental health services.

DOC 350.15 (14) Use of health transfer summary form under s. 302.388 (2), Stats.

Wisconsin State Statute 302.388 Prisoner medical records.

(2) HEALTH SUMMARY FORM.

- (a) The department shall provide each jailer a standardized form for recording the medical conditions and history of prisoners being transferred to the department or another county's jail. Except as provided in pars. (b) and (bm), jail medical staff shall complete the form and provide it to the receiving institution intake staff at the time of each such transfer.
- (b) If the jail does not have medical staff on duty at the time of a transfer, the jailer or his or her designee shall complete as much of the form as possible and provide it to the receiving institution intake staff at the time of the transfer. The jailer shall ensure that all of the following occur within 24 hours after the transfer.
 - 1. The jail medical staff, the prisoner's health care provider or, if the prisoner does not have a health care provider, a health care provider under contract with the jail reviews the form provided to the receiving institution at the time of the transfer.
 - 2. The medical staff or health care provider reviewing the form corrects any errors in the form and includes in it any additional available information.
 - 3. The medical staff or health care provider reviewing the form transmits the updated form or the information included on the form by the quickest available means to the receiving institution intake staff.
- (bm) Jail medical staff need not complete the form if the jailer or his or her designee provides a copy of the prisoner's complete medical file to the receiving institution intake staff at the time of the transfer.
- (f) Receiving institution intake staff may make a health summary form available to any of the following:
 - 1. The prison's or iail's medical staff.
 - 2. A prisoner's healthcare provider.
 - 3. In the case of a prison or jail that does not have medical staff on duty at the time of the transfer, a health care provider designated by the department or the jailer to review health summary forms.
 - 4. In the case of a jail that does not have medical staff, a person designated by the jailer to maintain prisoner medical records.

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DO	C-27	744 (4/2015)			
CON	/IPLI	IANCE	VER	RIFICATION	
	\leq	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
		Needs improvement	\boxtimes	Sample of facility records reviewed	Other (specify):
		Non-compliant		Sight confirmation by inspector	
		Not reviewed	\boxtimes	Verbal confirmation by facility staff	
				ems with the completion of the health npletes the health transfer summary fo	•
infe	(a) F (b) C (c) F	n control shall contain all of the following provision of treatment and supervision Documentation of the need for isolation provision of laboratory screening for in	llowin of in or	nmates during isolation or quarantine under s. quarantine under s. 252.06(6)(b), Stats., in the	e inmate's confidential medical file. icable disease if ordered by medical personnel.
COM	/IPLI	IANCE	VER	RIFICATION	
	$ \overline{} $	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
		Needs improvement		Sample of facility records reviewed	Other (specify):
		Non-compliant		Sight confirmation by inspector	
		Not reviewed	\boxtimes	Verbal confirmation by facility staff	
Com	mer	nts: Policies and procedures are	e in	place for communicable disease and i	nfection control.
COM	■ ⁄IPLI	0.15 (16) Detoxification and managed Appropriate housing and supervision IANCE	is pr		
	<u> </u>	Meets standard		Policy and procedure manual review	Previous compliance documented
		Needs improvement		Sample of facility records reviewed	Other (specify):
	<u> </u>	Non-compliant		Sight confirmation by inspector	
		Not reviewed	\boxtimes	Verbal confirmation by facility staff	
Com	mer	nts: Procedures and protocols a	ire ii	n place for the detoxification and mana	agement of intoxicated inmates.
and DOC	adn 35	ninistration of prescription and non 0.16 (1) A qualified health care pro	-pre fessi	scription medications. ional shall prescribe medications and order	I procedures relating to the control, delivery reatments.
		IANCE		RIFICATION	
=	<u> </u>	Meets standard	$\frac{\square}{\square}$	Policy and procedure manual review	Previous compliance documented
	₫	Needs improvement	$\underline{\underline{X}}$	Sample of facility records reviewed	Other (specify):
	<u> </u>	Non-compliant		Sight confirmation by inspector	
		Not reviewed	\boxtimes	Verbal confirmation by facility staff	
sigr hire	nific d fo	ant coverage at the facility by N	Nurs Il Dii	is at the jail for approximately 32 hourse Practitioners per week, at the time of rector and/or Nurse Practitioners are a ned in	of inspection no Physician had been
docı	ume	ented training shall be provided to j	ail si	aff that deliver medications.	of medication at prescribed times. Annual
		IANCE	VEF	RIFICATION	
	<u> </u>	Meets standard		Policy and procedure manual review	Previous compliance documented
<u> </u>	4	Needs improvement	X	Sample of facility records reviewed	Other (specify):
<u> </u>	4	Non-compliant		Sight confirmation by inspector Verbal confirmation by facility staff	
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Office of Detention Facilities DOC-2744 (4/2015)

Comments: Nursing staff deliver all medications to the inmate population.

	C 350.16 (3) Determination by appropria essary.	te	personnel that all medications brought in b	y iı	nmates or other persons for an inmate are				
	 Verification of prescription medication. 	is r	performed by a health care provider or an appr	opr	riately trained designee.				
CON	COMPLIANCE VERIFICATION								
	Meets standard	X	Policy and procedure manual review	П	Previous compliance documented				
	Needs improvement	$\stackrel{\square}{\vdash}$	Sample of facility records reviewed	H	·				
<u></u> _	-	H	Sight confirmation by inspector	Ш	Other (specify):				
<u></u> _	Non-compliant Not reviewed		Verbal confirmation by facility staff						
			<u> </u>						
			ces are medications authorized to be lot permitted within the facility and are						
	C 350.16 (5) Any medications kept at the The storage of inmate medications ma	ja i ake: are	kept in a separate, medical refrigerator, unless	nat	is not accessible to inmates.				
CON	MPLIANCE \	/EF	RIFICATION						
	Meets standard		Policy and procedure manual review	П	Previous compliance documented				
Ē	Needs improvement	Ī	Sample of facility records reviewed	Ħ	Other (specify):				
F	Non-compliant	$\overline{\boxtimes}$	Sight confirmation by inspector	<u> </u>	Caron (openny).				
┪	Not reviewed		Verbal confirmation by facility staff						
		f p	rescription and nonprescription medication reactions are listed in the current policy and processing the current policy and poli						
CON	MPLIANCE \	/EF	RIFICATION						
	Meets standard	X	Policy and procedure manual review	П	Previous compliance documented				
Ī	Needs improvement		Sample of facility records reviewed	Ħ	Other (specify):				
	Non-compliant		Sight confirmation by inspector	<u> </u>	carer (epocary).				
	Not reviewed	$\overline{\boxtimes}$	Verbal confirmation by facility staff						
Com	nments: Nursing staff delivers all med	<u> </u>							
who DOC prof	c administered or delivered the medication C 350.16 (8) All refusals of recommende fessional shall monitor the inmate in acc All medication documentation is comp The name of the pharmacist or qualifie	on, d o ord lete	nealth care professional, the full (not abbreviate	del II b s. ed)	e documented. A health care name of the medication, the dosage and				
	frequency, the date and time of administration or delivery, and any special instructions or comments are documented for each prescription medication. The medication administration and delivery records are reviewed by the health care provider and/or jail administrator or designee for completeness, accuracy, and legibility. There are no unexplained gaps in the documentation and inmate refusals of medication are clearly indicated and documented.								
		_	RIFICATION						
	Meets standard		Policy and procedure manual review	Щ	Previous compliance documented				
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):				
	Non-compliant	\boxtimes	Sight confirmation by inspector						

Offic	PARTMENT OF CORRECTIONS ce of Detention Facilities C-2744 (4/2015)				WISCONSIN
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comi	ments: All medications are cu	rrently be	ing documented on the electronic M/	٩R	
	350.16 (9) Return of an inmate's 350.16 (10) Inventory or dispos		on inventoried at admission. ed medications upon the inmate's release	or	transfer.
	 Unused medication is disposed Established protocols regarding 	d of by a he g the dispos	cumented. alth care provider, transferred with the inmate sal of narcotic medications, including witness edication is retained in the inmate's medical t	pre	esence, are followed.
	IPLIANCE	VER	IFICATION		
\geq	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
retui			•		n inmate is being released in order to all of medications or returning them to
may	be at risk of seriously injuring the	nemselves.		the	e supervision and housing of inmates who
	IPLIANCE		IFICATION	_	
\geq			Policy and procedure manual review	L	Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
Com	ments: Policies and procedure	es are in p	place for the supervision and housing	g o	f inmates with suicidal ideation.
	350.17 (1) Obtaining docume	nted inforn	nation from the arresting or transporting	ga	gency to assess an inmate's potential fo
	IPLIANCE	VER	IFICATION		
\geq	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed		Verbal confirmation by facility staff		
	ments: All transporting agencing of an inmate.	ies are re	quired to complete a brief form prior	to (exiting the facility regarding the well-
	Intake screening is performed The answers to all screening of The screening form is legible, Appropriate follow-up question Medical or mental health care A secondary security review of	on each ne questions ar accurate, ar as are asked professiona f intake scre	e documented. nd complete, including detailed narratives wh I and answers recorded, when suicide risk is Is review intake screening reports when risk	en ind is ir	necessary. icated.
СОМ	IPLIANCE	VFR	IFICATION		
SOIVI 			Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	F	Other (specify):
F	Non-compliant		Sight confirmation by inspector	_	(op-o/).

Verbal confirmation by facility staff

Not reviewed

Comments: An intake screening is completed by nursing staff on every inmate booked into the jail.

	50.17 (3) Procedure for placer nate on suicide watch shall inc			proce	edures relating to the procedure for placing
a) b) c)	Designation of housing areas	and security	rvisory staff if an inmate is identified as a precautions for inmates who are placed onmates on suicide watch, including freque	on suid	cide watch.
COMP	LIANCE	VER	IFICATION		
\square	Meets standard	\square	Policy and procedure manual review		Previous compliance documented
	Needs improvement	$\overline{\boxtimes}$	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
watch suicid	n. Medical and Mental Hea	Ith are als		ousin	ate needing to be placed on suicide ig is in place for those placed on a inutes at irregular intervals.
DOC 3	50.17 (4) Identification of train	ed person	s who may assess an inmate's level of	suicid	le risk.
COMP	LIANCE	VER	IFICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
Щ	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
	e watch. Assessment by a qua	lified men	I health professionals within 12 hours tal health professional shall be completed alified mental health professional are doctored.	ted as	
COMP	LIANCE	VFR	IFICATION		•
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
П	Non-compliant		Sight confirmation by inspector		g Guiler (epoony).
П	Not reviewed		Verbal confirmation by facility staff		
	ents: A qualified mental hea	Ith profes			ally sooner) of the placement of an ive code.
status	after an on-site face-to-face as	sessment		rized	to remove an inmate from a suicide watch
	LIANCE		IFICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
<u> </u>	Needs improvement		Sample of facility records reviewed		Other (specify):
<u> </u>	Non-compliant		Sight confirmation by inspector		
Ш	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
	ents: Only a qualified menta e face-to-face assessment		professional is authorized to remov	e an	inmate from a suicide watch after an

Office of Detention Facilities DOC-2744 (4/2015)

DOC 350.17 (7)	Frequency of communication	tion between healt	h care and jail	l personnel r	regarding the	status of an	inmate who is o
suicide watch.							

- A clear and reliable means of communicating information between correctional staff members regarding inmates who are suicide risks is utilized.
- All communication between jail staff, administration, and medical/mental health care providers is documented, including names of those
 involved, summary of content of discussion, and actions taken.

COMPLI	ANCE	VERI	FICATION	
\boxtimes	Meets standard		Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed	\boxtimes	Verbal confirmation by facility staff	

Comments: Communication between medical, mental health, and security staff appears to be excellent, particularly when an inmate is on a suicide watch.

DOC 350.17 (8) Intervention protocol during an apparent suicide attempt, including life-sustaining measures.

- Staff demonstrate a working knowledge of first aid and emergency response measures.
- Staff are familiar with the location and effective use of emergency response equipment.
- Staff received training on emergency response, including use of emergency response equipment within the past evaluation period.
- The actions taken in response to a suicide in progress or suicide threat are documented.

COMPLIANCE		VERIFICATION
\boxtimes	Meets standard	Previous compliance documented
	Needs improvement	Sample of facility records reviewed Other (specify):
	Non-compliant	Sight confirmation by inspector
	Not reviewed	∀erbal confirmation by facility staff

Comments: All staff is trained in first aid, emergency response and the use of equipment. Training is completed annually during in-service.

DOC 350.17 (9) Identification of persons to be notified in case of attempted or completed suicides.								
COMPLIA	ANCE	VERIFICATION						
	Meets standard	Policy and procedure manual review	Previous compliance documented					
	Needs improvement	Sample of facility records reviewed	Other (specify):					
	Non-compliant	Sight confirmation by inspector						
	Not reviewed	Verbal confirmation by facility staff						

Comments: Jail policy stipulates who is to be notified in the event of an attempted or completed suicide.

DOC 350.17 (10) Documentation of actions and decisions regarding inmates who are suicide risks, including all of the following:

- (a) Individual initiating the suicide watch.
- (b) Date and time watch was initiated.
- (c) Reason watch was initiated.
- (d) Name of supervisor contacted.
- (e) Date and time supervisor contacted.
- (f) Name, date, and time of referral to mental health professional.
- (g) Written documentation from the mental health professional removing an inmate from a suicide watch including name, date and time.
 - Supervisory review of the relevant documentation is completed.

COMPLIANCE		VERIFICATION					
\boxtimes	Meets standard	Policy and procedure manual review	Previous compliance documented				
	Needs improvement	Sample of facility records reviewed	Other (specify):				
	Non-compliant	Sight confirmation by inspector					
	Not reviewed	∀ Verbal confirmation by facility staff					

Comments: All actions and decisions regarding an inmate placed on suicide watch are well documented.

facto				
	PLIANCE	VE_	RIFICATION	
\boxtimes			Policy and procedure manual review	Previous compliance documented
<u>L</u>	Needs improvement	$\underline{\hspace{1cm}}$	Sample of facility records reviewed	U Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed	\succeq	Verbal confirmation by facility staff	
	nents: In FY 2017, jail staff co	ompleted	d a 2 hour training block on jail suicid	e assessment as part of the annual in-
DOC	350.17 (12) Access by staff to d	ebriefing	and support services.	
COM	PLIANCE	VE	RIFICATION	
\boxtimes	Meets standard	\times	Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
T	Non-compliant		Sight confirmation by inspector	
	Not reviewed	$\overline{\times}$	Verbal confirmation by facility staff	
	nents: Although no suicides of iefing staff and offering suppose the suppose iefing suppose the suppose iefing suppose the suicides of iefing suppose iefing suppose iefing suppose iefing suppose iefing suicides of iefing suicides of iefing suppose iefin suppo		since the last inspection, procedures ices.	s are in place for the provision of
	`	-	onal review following a suicide or signific	ant suicide attempt.
	PLIANCE		RIFICATION	
$\underline{\hspace{0.1cm}}$		$\underline{\hspace{1cm}}$, ,	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	U Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed	\succeq	Verbal confirmation by facility staff	
	nents: Although no suicides of ational review following a su		since the last inspection, procedures significant attempt.	s are in place to conduct a formal
of an polici DOC neets (a	inmate in his or her cell or or es and procedures outlining the 350.25 (1) An inmate may be positions one of the following:	ther designation and the designation in the designa	gnated area to ensure personal safety are trative confinement proces. Indministrative confinement if the inmate's means to the inmate, another person or property. I.	means a non-punitive, segregated confiner nd security within the jail. The jail shall I shall to be continued presence in the general popula
СОМІ	PLIANCE	VE	RIFICATION	
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Other (specify):
	Non-compliant		Sight confirmation by inspector	
	Not reviewed	$\overline{}$	Verbal confirmation by facility staff	
	nents: A policy is in place for Il inmates assigned to admir			confinement. Documentation is provid

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DOC 350.10 (2) Storage of records. Records shall be kept in a secure area. Juvenile records shall be kept separate from adult records and shall be maintained in a confidential manner in accordance with s. 938.396, Stats., and any other applicable federal or state law.

COMPLIANCE		VERIFICATION	
\boxtimes	Meets standard	Policy and procedure manual review	Previous compliance documented
	Needs improvement	Sample of facility records reviewed	Other (specify):
	Non-compliant	Sight confirmation by inspector	
	Not reviewed	Verbal confirmation by facility staff	

Comments: Records are being maintained in a confidential manner. The jail is currently not authorized to house juvenile offenders.

MAINTENANCE OF JAIL, SANITATION AND CARE OF PRISONERS

Wisconsin State Statute 302.37 Maintenance of jail and care of prisoners.

Wisconsin State Statute 302.37 (1) (a) The sheriff or other keeper of a jail shall constantly keep it clean and in a healthful condition and pay strict attention to the personal cleanliness of the prisoners and shall cause the clothing of each prisoner to be properly laundered. The sheriff or keeper shall furnish each prisoner with clean water, towels and bedding. The sheriff or keeper shall serve each prisoner 3 times daily with enough well-cooked, wholesome food. The county board shall prescribe an adequate diet for the prisoners in the county jail.

Wisconsin State Statute 302.37(3)(a) The county or municipality shall furnish its jail with necessary bedding, clothing, toilet facilities, light and heat for prisoners

Wisconsin State Statute 302.37 (4) The sheriff or other keeper of a jail may use without compensation the labor of any prisoner sentenced to actual confinement in the county jail or, with the prisoner's consent, any other prisoner in the maintaining of and the housekeeping of the jail, including the property on which it stands. Any prisoner who escapes while working on the grounds outside the jail enclosure shall be punished as provided in s. 946.42.

- A daily inspection is conducted by jail staff of housekeeping, sanitation, and physical plant maintenance.
- The jail is constantly clean and in a healthful condition.
- Inmate areas are free of graffiti, posters, wall coverings, etching, etc.
- All surfaces, equipment, and facilities are clean and in good repair.
- · Air handling systems, including ventilation screens and covers, are clean, unobstructed, and in good working order.
- Inmate personal property allowed in the housing units is subject to limitations on volume and content.
- Inmates are held accountable for making the beds, cleaning the floors, cleaning the common bathroom facilities, properly storing property, and maintaining cleanliness and order in the housing units daily.
- Inmates and staff are held accountable for housekeeping and sanitation deficiencies.
- Identified maintenance needs are addressed in a timely manner.
- Hallways are free of clutter and obstructions.

COMPLIANCE		VERIFICATION
	Meets standard	Policy and procedure manual review Previous compliance documented
	Needs improvement	Sample of facility records reviewed Other (specify):
	Non-compliant	Sight confirmation by inspector
	Not reviewed	∀erbal confirmation by facility staff

Comments: Overall, the facility was found to be clean and well organized. All inmates are furnished with bedding, clothing, toilet facilities, light and heat. In large part, it appears that staff are holding inmates accountable for their living area, dayroom and showers. The 2 officers who serve as liaisons to Facilities Management appears to be effective. However, it was suggested that administration review the feasibility of adding a full-time facilities manager to coordinate the completion of all maintenance requests in a timely manner. There were also inaccuracies being documented on the monthly safety and sanitation reports in terms of when maintenance actually fixed a problem.

DOC 350.12 Sanitation and Hygiene. The jai	l si	hall have policies and procedures relating to	sanitation and hygiene.
DOC 350.12 (1) Facilities are required to be			Samualon and Hygiene.
		RIFICATION	
			Provious compliance decumented
	=	Policy and procedure manual review	Previous compliance documented
Needs improvement		Sample of facility records reviewed	Other (specify):
Non-compliant Not reviewed	$\stackrel{\triangle}{\vdash}$	Sight confirmation by inspector Verbal confirmation by facility staff	
	<u></u>	· · · · · · · · · · · · · · · · · · ·	-Cara and an east on an east of delication
•	nist	an and well organized during the inspe- tration review the feasibility of adding a ince requests in a timely manner.	•
DOC 350.12 (2) Blankets shall be laundered DOC 350.12 (3) Sheets, pillowcases and ma DOC 350.12 (4) Clean towels shall be issued	ttre	ess covers shall be changed and washed at l	east weekly and before reissue.
COMPLIANCE	/EF	RIFICATION	
Meets standard	\boxtimes	Policy and procedure manual review	Previous compliance documented
Needs improvement		Sample of facility records reviewed	Other (specify):
Non-compliant	\boxtimes	Sight confirmation by inspector	
Not reviewed	\boxtimes	Verbal confirmation by facility staff	
shall be covered with a fire retardant, water a clean and sanitary condition. The sheriff s	pro hal	where there is a need for overnight detention, easy-to-sanitize material. Mattresses and provide adequate bedding. Mattresses shall be provide evidence to the sheriff size to fit the bed.	I pillows shall be kept in good repair and in Il be cleaned and sanitized before reissue.
COMPLIANCE	/FF	RIFICATION	
			Provious compliance decumented
	믬	Policy and procedure manual review Sample of facility records reviewed	Previous compliance documented
Needs improvement	\Box	Sight confirmation by inspector	Other (specify):
Non-compliant Not reviewed		Verbal confirmation by facility staff	
	<u>eir</u>	ng replaced as needed. All mattresses	are cleaned and sanitized before
		inmate whose clothing has been confiscate in custody. Footwear shall be cleaned and s	
	/EF	RIFICATION	
Meets standard		Policy and procedure manual review	Previous compliance documented
Needs improvement		Sample of facility records reviewed	Other (specify):
Non-compliant	X	Sight confirmation by inspector	
Not reviewed		Verbal confirmation by facility staff	
Comments: All inmates were found to ha	ve	appropriate clothing and footwear.	

DOC 350.12 (9) Laundry schedule shall weekly.	ll be esta	blished to meet daily needs. All issued	d and	allowed clothing items are laundered twice
COMPLIANCE	VER	IFICATION		
Meets standard		Policy and procedure manual review		Previous compliance documented
Needs improvement		Sample of facility records reviewed	X	•
Non-compliant		Sight confirmation by inspector		. С. (оросну).
Not reviewed		Verbal confirmation by facility staff		
Comments: All laundry for the Milwa Correction and transported to the		ounty Jail is completed by inmate	worke	ers at the Milwaukee County House of
	shall be	e prominently and distinctly labeled	for ea	Containers of poisonous compounds used asy identification of contents. Poisonous cked area not accessible to inmates.
COMPLIANCE	VER	IFICATION		
Meets standard		Policy and procedure manual review		Previous compliance documented
Needs improvement		Sample of facility records reviewed		Other (specify):
Non-compliant		Sight confirmation by inspector		
Not reviewed		Verbal confirmation by facility staff		
and hygiene, including toothpaste and	toothbru	ish, soap and comb. Basic feminine hy	giene	fficient for the maintenance of cleanliness materials for females and toilet paper shall os, shaving materials or feminine hygiene
COMPLIANCE	VER	IFICATION		
Meets standard	\boxtimes	Policy and procedure manual review	Г	Previous compliance documented
Needs improvement		Sample of facility records reviewed		Other (specify):
Non-compliant	$\overline{\boxtimes}$	Sight confirmation by inspector		7 (-1 7)
Not reviewed		Verbal confirmation by facility staff		
Comments: Hygiene items are being	g provid		e thro	ough canteen.
DOC 350.12 (12) Inmates are provided traps used for passing meals or other i			on us	se and meals shall be kept sanitized. Door
COMPLIANCE	VER	IFICATION		
Meets standard		Policy and procedure manual review		Previous compliance documented
Needs improvement		Sample of facility records reviewed		Other (specify):
Non-compliant		Sight confirmation by inspector		
Not reviewed		Verbal confirmation by facility staff		
the traps used for passing meals f	or those	•		om tables are being cleaned, as are

DEPARTMENT OF CORRECTIONS WISCONSIN Office of Detention Facilities DOC-2744 (4/2015) **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Verbal confirmation by facility staff Not reviewed Comments: Staff complete monthly safety and sanitation inspections and items in need of correction are forwarded to maintenance. However, there were inaccuracies being documented on the monthly safety and sanitation reports in terms of when maintenance actually fixed a problem. DOC 350.12 (14) Common use grooming tools are disinfected and cleaned before reissue and are stored in a secure area. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Common use grooming tools are cleaned and disinfected when necessary. Each inmate is provided with a disposable razor, which is then discarded and not reissued to another inmate. DOC 350.12 (15) Property storage containers shall be sanitized before reuse. Property storage containers may include bags, bins, totes and lockers. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: All property storage containers and bags are being sanitized before reuse. The jail has been completing this procedure for a number of years. DOC 350.12 (16) Trash is removed daily from all dayrooms. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Sight confirmation by inspector Non-compliant Not reviewed Verbal confirmation by facility staff Comments: All trash is removed from the dayrooms on a daily basis. DOC 350.12 (17) Hazardous waste shall be disposed of according to government regulations. **COMPLIANCE VERIFICATION**

Meets standard

Non-compliant

Not reviewed

Comments:

Needs improvement

INMATE SERVICES

Policy and procedure manual review

Sample of facility records reviewed

Verbal confirmation by facility staff

Sight confirmation by inspector

DOC 350.26 Grievance Process. The jail shall have policies and procedures relating to an inmate grievance process and ensure it is available to all inmates and includes at least one level of appeal.

Previous compliance documented

Other (specify):

DEPARTMENT OF CORRECTIONS WISCONSIN

	-2744 (4/2015)				
	PLIANCE	VER	IFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement	\boxtimes	Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comm	ents: The jail maintains a grie	evance p	rocedure. A grievance log is also be	ing	g maintained electronically that
provi	des administration with a me	asure of	the jail's inmate climate. A process i	is i	n place for inmates to appeal a
grieva	ance finding.				
	350.27 Legal Access. The jail sinaterials.	hall have	policies and procedures to address inmat	tes	' access to the courts, their attorneys, and
COMP	PLIANCE	VER	IFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
\boxtimes	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comm	nents: All inmates have reason	nable ac	cess to the courts, attorneys and lega	al r	materials. It was suggested that jail
admii	nistration review the feasibilit	y of esta	ablishing a physical law library that in	ma	ates would have access to in addition
to ha	ving staff research cases for	inmates	upon their request.		
		_	cies and procedures to address indigence. ns and procedures to define indigence.	•	
DOC 3	350.28 (2) Inmates' access to hea	alth care,	programming and essential services is no	ot p	recluded by inability to pay.
COMP	PLIANCE	VER	IFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant		Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
			nealth care or other essential services th services. Programming is also ava		
	350.29 Mail. The jail shall have eys, the court system, government			t b	etween inmates and their families, friends,
DOC 3	350.29 (1) Provision for staff ins	oection ar	nd reading of non-privileged incoming and	l oı	utgoing mail.
•	Staff demonstrate a working kno	wledge of	the procedures for mail inspection.		
DOC 3	350.29 (2) Provision for the limit	ed inspec	tion of incoming and outgoing privileged r	ma	il.
	Staff demonstrate a working know	wledge of	the definition of privileged mail and the proce	edu	ures for inspecting it.
COMP	PLIANCE	VER	IFICATION		
\boxtimes	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
$\overline{\boxtimes}$	Needs improvement		Sample of facility records reviewed	$\overline{\boxtimes}$	Other (specify):

Comments: Provision for incoming and outgoing mail is addressed in the inmate handbook. A number of inmates brought forth some concern that mail was only be distributed once per week. Upon investigation, it appeared that mail was being delivered to the jail, but not being distributed to the housing units. This has since been rectified according to jail administration. This office will continue to monitor the timeliness of mail delivery.

Sight confirmation by inspector

Verbal confirmation by facility staff

Non-compliant Not reviewed

DOC 350.29 (3) Delivery of all non-privileged and approved privileged incoming mail.			
DOC 350.29 (5) Delivery of all non-privileged and approved privileged incoming mail.			
 Inmate mail is delivered to inmates in a 	a timely manner.		
COMPLIANCE V	ERIFICATION		
Meets standard	Policy and procedure manual review	Previous compliance documented	
Needs improvement	Sample of facility records reviewed	Other (specify):	
Non-compliant	Sight confirmation by inspector		
Not reviewed	Verbal confirmation by facility staff		
Comments: A number of inmates brought	t forth some concern that mail was only b	e distributed once per week. Upon	
investigation, it appeared that mail was	being delivered to the jail, but not being	distributed to the housing units. This	
	il administration. This office will continue	to monitor the timeliness of mail	
delivery.			
DOC 350.29 (4) Inventory and disposition of	contraband items found in mail.		
- Control and items are inventorial and	de europete d		
 Contraband items are inventoried and Contraband is promptly turned over to 			
	ERIFICATION		
		Draviava compliance descripted	
Meets standard	Policy and procedure manual review	Previous compliance documented	
	Sample of facility records reviewed	_ Other (specify):	
Non-compliant Not reviewed	Sight confirmation by inspector Verbal confirmation by facility staff		
	<u> </u>		
Comments: Contraband items are invented	oried and well documented. A silver si	nakedown report is being completed.	
DOC 350.29 (5) Provision of postage to indig	gent inmates.		
COMPLIANCE V	ERIFICATION		
Meets standard	Policy and procedure manual review	Previous compliance documented	
Needs improvement	Sample of facility records reviewed	Other (specify):	
Non-compliant	Sight confirmation by inspector	_ Guier (opeany).	
	Verbal confirmation by facility staff		
Comments: A policy is in place for the pro	<u> </u>		
Comments. A policy is in place for the pro-	ovision of postage to margent inmates.		
DOC 350.29 (6) Provision for notifying inmat	tes when outgoing or incoming mail is withheld	4.	
, ,			
 A non-delivery of mail form is complete 	ed and provided to the inmate when mail is confisc	ated, destroyed, or rejected.	
COMPLIANCE V	ERIFICATION		
Meets standard	Policy and procedure manual review	Previous compliance documented	
Needs improvement	Sample of facility records reviewed	Other (specify):	
Non-compliant	Sight confirmation by inspector		
Not reviewed	Verbal confirmation by facility staff		
Comments: Inmates are being notified in a timely manner when outgoing or incoming mail is being withheld.			
DOC 350.30 Visitation. The jail shall have policies and procedures relating to visitation.			
DOC 350 30 (1) Establishment of a visiting	schedule for family, friends, attorneys, and oth	are Attorney visits shall be allowed during	
reasonable hours, as long as security and da		one Attorney visits shall be allowed during	
DOC 350.30 (2) Establishment of procedures for requesting visitation during nonscheduled times.			
 Accommodations are made for visits to occur at times other than scheduled visiting times. 			

Comments: All inmate visits by the public are via video visitation. Provisions are in place for the searching of inmates before and after each contact visit.

Policy and procedure manual review

Sample of facility records reviewed

Verbal confirmation by facility staff

Sight confirmation by inspector

Meets standard

Non-compliant

Not reviewed

Needs improvement

Previous compliance documented

Other (specify):

DOC 350.31 Programs and services. The j services.	ail shall have policies and procedures relating to the provi	sion of inmate programs and	
DOC 350.31 (1) Use of community resources	s, contract providers, and volunteers authorized by the sherif	f.	
DOC 350.31 (2) Notification to inmates of av	ailability, eligibility, and schedules.		
DOC 350.31 (3) Conducting criminal background	ound checks on all volunteers, community resources, and co	ntract providers.	
DOC 350.31 (4) Orientation and training on f	acility operations for all volunteers.		
DOC 350.31 (5) Educational programming Department of Public Instruction.	for inmates who are under 18 years of age consistent v	with the requirements of the	
COMPLIANCE	'ERIFICATION		
Meets standard	Policy and procedure manual review Previous co	mpliance documented	
Needs improvement	Sample of facility records reviewed Other (spec	ify):	
Non-compliant	Sight confirmation by inspector		
Not reviewed	Verbal confirmation by facility staff		
Comments: The jail continues to do an excellent job recruiting volunteers to assist with inmate programming. All volunteers and contract providers have criminal background checks completed, as well as an orientation to the facility prior to working in the jail.			
DOC 350.32 Religious programming. Inmates shall have the opportunity to participate in practices of their religious faith consistent with existing state and federal statutes. The jail shall have policies and procedures relating to religious programming. DOC 350.32 (1) Identification of religious organizations and clergy willing to conduct religious services in the facility.			
	e schedule of religious services available in the jail. procedure for assessing and responding to inmate requests for re	ligious services.	
	/ERIFICATION		
Meets standard		mpliance documented	
Needs improvement	Sample of facility records reviewed Other (spec	•	
Non-compliant	Sight confirmation by inspector	<u>y).</u>	
·	Verbal confirmation by facility staff		
Comments: Inmates are provided information on the religious programming available at the jail, and a procedure is in place for inmates to request programming for all religions.			
	ms that may be kept on an inmate's person or in the cell.		
	icies are consistently applied throughout the jail.		
COMPLIANCE	ERIFICATION		
Meets standard	Policy and procedure manual review Previous co	mpliance documented	
Needs improvement	Sample of facility records reviewed Other (spec	ify):	
Non-compliant	Sight confirmation by inspector		
Not reviewed	Verbal confirmation by facility staff		
Comments: Policies are in place for inmates to request religious items.			
DOC 350.32 (4) Conducting criminal background checks on members of a religious organization and clergy.			
	ERIFICATION		
Meets standard	Policy and procedure manual review Previous co	mpliance documented	
Needs improvement	Sample of facility records reviewed Other (spec	ify):	
Non-compliant	Sight confirmation by inspector		
Not reviewed	Verbal confirmation by facility staff		
Comments: All volunteers and contract p facility.	roviders have a criminal background check completed	I prior to entering into the	

DEPARTMENT OF CORRECTIONS WISCONSIN Office of Detention Facilities DOC-2744 (4/2015) DOC 350.32 (5) Orientation and training on facility operations for all volunteers. Documentation of the orientation and volunteer agreement is on file. **COMPLIANCE** VERIFICATION Previous compliance documented Meets standard Policy and procedure manual review Sample of facility records reviewed Needs improvement Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: All volunteers receive an orientation on facility operations prior to working within the jail. DOC 350.33 Recreation. The jail shall have policies and procedures relating to recreation. DOC 350.33 (1) Identification of the recreational activities that are available. DOC 350.33 (2) Schedule of recreational activities. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: The jail maintains indoor recreation areas for inmates. DOC 350.33 (3) When and where available, at least one hour of daily exercise and recreation is outside the cell or outdoors. **COMPLIANCE VERIFICATION** Meets standard Policy and procedure manual review Previous compliance documented Needs improvement Sample of facility records reviewed Other (specify): Non-compliant Sight confirmation by inspector Not reviewed Verbal confirmation by facility staff Comments: Inmates in general population have sufficient amounts of time out of their cells. Inmates confined in the cellblocks are afforded one hour outside of their cell each day. DOC 350.34 Publications. The jail shall have policies and procedures relating to access to publications. DOC 350.34 (1) Provision of publications of general interest for inmates such as books, newspapers and magazines. DOC 350.34 (2) Identification of publications that are prohibited for inmates because their content creates a security risk. Reading material restrictions are posted or otherwise accessible to inmates. DOC 350.34 (3) Inspection of publications brought by visitors for inmates if the jail allows visitors to bring in reading materials. There are limitations on the volume of personal reading materials that can be kept in the housing area, and these limitations are enforced consistently throughout the jail. All reading materials allowed to be brought in by visitors are subject to search. **COMPLIANCE VERIFICATION**

 ✓ Meets standard
 ✓ Policy and procedure manual review
 ✓ Previous compliance documented

 ✓ Needs improvement
 ✓ Sample of facility records reviewed
 ✓ Other (specify):

 ✓ Non-compliant
 ✓ Sight confirmation by inspector

 ✓ Not reviewed
 ✓ Verbal confirmation by facility staff

Comments: The jail maintains policies and procedures for inmate access to publications. Limitations on the amount of material permitted in each cell is also enforced.

DOC-2144 (4/2013)			
DOC 350.35 Canteen. The jail shall have policies and procedures for the establishment and use of canteen, vending or other similar services for inmates.			
DOC 350.35 (1) Canteen shall be made a	vailable to eligible inmates.		
DOC 350.35 (2) Access to canteen may be	pe restricted by the facility based upon inmate c	assification or status.	
COMPLIANCE	VERIFICATION		
Meets standard	Policy and procedure manual review	Previous compliance documented	
Needs improvement	Sample of facility records reviewed Other (specify):		
Non-compliant	Sight confirmation by inspector		
Not reviewed	Verbal confirmation by facility staff		
· · · · · · · · · · · · · · · · · · ·	place for inmates to order canteen on a w	eekly basis from a private vendor	
(Aramark).			
	FOOD SERVICE		
DOC 350.11 Food Service. The jail shall	have policies and procedures relating to food s	ervice.	
DOC 350.11 (1) The jail shall provide nut	ritious and quality food for all inmates.		
DOC 350.11 (2) An annual menu review l	by a qualified nutritionist or dietician shall be co	mpleted and maintained in the facility files.	
COMPLIANCE	VERIFICATION		
Meets standard	Policy and procedure manual review	Previous compliance documented	
Needs improvement	Sample of facility records reviewed	Other (specify):	
Non-compliant	Sight confirmation by inspector		
Not reviewed	Verbal confirmation by facility staff		
reviewed and approved by a registe	mark for food service. A four week menu red dietician. all full-production and service kitchens in a jail I		
documenting that the food service area r			
COMPLIANCE	VERIFICATION		
Meets standard	Policy and procedure manual review	Previous compliance documented	
Needs improvement	Sample of facility records reviewed	Other (specify):	
Non-compliant	Sight confirmation by inspector		
Not reviewed	Not reviewed Verbal confirmation by facility staff		
no documentation as to if any violat	en was completed by EcoSure on 11/13/17 fons were observed or not, and no percent adicated that they would discuss with EcoS	age score regarding compliance	
	ion of the food service area is completed and do	cumented.	
COMPLIANCE	VERIFICATION		
Meets standard	Policy and procedure manual review	Previous compliance documented	
Needs improvement	Sample of facility records reviewed	Other (specify):	
Non-compliant	Sight confirmation by inspector		
Not reviewed	lot reviewed Verbal confirmation by facility staff		
Comments: Internal monthly inspection	ns are being completed for the food service	e area by Aramark staff.	

DOC 350.11 (5) The kitchen area and all equidocumented.	ipment are maintained in a sanitary condition.	Routine inspections are completed and
	EDIFICATION	
	ERIFICATION	Draviava samulianas da comandad
	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
	Sight confirmation by inspector	
Not reviewed	Verbal confirmation by facility staff	
	to be clean and well maintained. Aramark	staff complete regular inspections of
the food service area as do security sta		
DOC 350.11 (6) Three nutritious meals are holiday food service demands, provided bas	provided daily, two of which are hot. Variatio ic nutritional goals are met.	ns may be allowed based on weekend and
COMPLIANCE	ERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	
Not reviewed	Verbal confirmation by facility staff	
Comments: A review of the 90 day menu	showed that three meals are being provide	ded daily, two of which are hot.
DOC 350.11 (7) Food temperatures are prop	erly maintained.	
 Documentation of daily food preparation Documentation of periodic serving tem 		
COMPLIANCE	ERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	
Not reviewed Verbal confirmation by facility staff		
Comments: Food temperatures are being	taken and documented on a daily basis.	
DOC 250.44 (0). Food items are stored an	even victory at least 6 inches off the floor. On	and feed neekeese are stared in cirtisht
containers that are labeled and dated. Food	propriately at least 6 inches off the floor. Op items are stored in appropriate locations and to	ened 1000 packages are stored in airtight emperatures.
Documentation of daily cooler and free	zer temperatures is maintained.	
COMPLIANCE	ERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	
Not reviewed	Verbal confirmation by facility staff	
Comments: Food items are being stored	in appropriate locations and temperatures	recorded.
DOC 350.11 (9) Special diets are provided as	s prescribed by a qualified health care profession	onal.
 Documentation of special diet orders is 	maintained.	
COMPLIANCE	ERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	- 1 //
Not reviewed	Verbal confirmation by facility staff	
	are reviewed and approved by a qualified	medical professional. All special diet
orders are maintained in the inmate file		and the process and the openion and

	from any foods that violate the inmate's religion. ailable foods from the menu served at the meal.	
COMPLIANCE	VERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	= (-)
Not reviewed	Verbal confirmation by facility staff	
Comments: The jail provides substitute	e meals for those inmates observing a religi	ous diet.
uniform.	ne kitchen who prepare or serve food shall bath	
	n food service areas shall wear clean garments an In the handling of food, drink, utensils or equipme	
COMPLIANCE	VERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	
Not reviewed	Verbal confirmation by facility staff	
Inmate kitchen workers also confirme	e kitchen are required to shower daily and a ed the requirement to shower daily. rided orientation and training prior to assignment	·
 Documentation of orientation and tr 	raining is maintained.	
COMPLIANCE	VERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	= (-)(//
Not reviewed	Verbal confirmation by facility staff	
Comments: Aramark food service man training.	nager indicated that all inmates assigned to	the kitchen receive orientation and
	ervised throughout all aspects of food preparation	n and service.
COMPLIANCE	VERIFICATION	
Meets standard	Policy and procedure manual review	Previous compliance documented
Needs improvement	Sample of facility records reviewed	Other (specify):
Non-compliant	Sight confirmation by inspector	
Not reviewed	Verbal confirmation by facility staff	
Comments: Aramark food service staff while it is in operation.	f are constantly monitoring inmate workers.	An officer is also posted in the kitchen

DOC 3	350.11 (16) Food and drink shall	be protec	cted from contamination. Meals are covered	ed o	during transit to and within the facility.
COMF	PLIANCE	VER	IFICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comm	nents: All meals are covered p	orior to le	eaving the kitchen area.		
DOC 3	350.11 (17) Kitchen food storage	and dish	washing equipment temperatures are rout	ine	ely monitored and documented.
COMF	PLIANCE	VER	IFICATION		
$\overline{\boxtimes}$	Meets standard		Policy and procedure manual review	П	Previous compliance documented
	Needs improvement		Sample of facility records reviewed	Ħ	Other (specify):
一一	Non-compliant		Sight confirmation by inspector	<u> </u>	Carot (opecity).
一片	Not reviewed		Verbal confirmation by facility staff		
Comm			shing equipment temperatures are do	ocı	umented on a daily basis.
DOC 3	350.11 (18) Garbage containers	are covere	ed, emptied daily, and are kept clean.		
COMF	PLIANCE	VER	IFICATION		
	Meets standard		Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed		Other (specify):
	Non-compliant	\boxtimes	Sight confirmation by inspector		
	Not reviewed	\boxtimes	Verbal confirmation by facility staff		
Comm	nents: Garbage containers are	e covere	d, emptied daily and kept clean.		
DOC 3	350.11 (19) Cleaning agents are	stored se	parately from food service items.		
COME	PLIANCE	VER	IFICATION		
	Meets standard	П	Policy and procedure manual review	П	Previous compliance documented
	Needs improvement	Ħ	Sample of facility records reviewed	Ħ	Other (specify):
一片	Non-compliant		Sight confirmation by inspector		Curs. (openly).
一一	Not reviewed		Verbal confirmation by facility staff		
Comm	nents: Cleaning agents are be	ing store	ed separately and away from food.		
DOC 3	250 11 (20) A socurity procedure	ie in plac	e to control and account for sharps, tools	an	d utancile at all times
DO0 .	330.11 (20) A Security procedure	is in plac	to control and account for snarps, tools	an	u utensns at an times.
•	Documentation of daily control a	and invent	ory is maintained.		
COMF	PLIANCE	VER	IFICATION		
	Meets standard	\boxtimes	Policy and procedure manual review		Previous compliance documented
	Needs improvement		Sample of facility records reviewed	靣	Other (specify):
一一	Non-compliant	M	Sight confirmation by inspector	<u> </u>	7.1 M
一百	Not reviewed		Verbal confirmation by facility staff		
Comm	nents: All sharps and tools are				. The kitchen also
	taine a log for all charne	, ioonou			. The Monet also